

## APPLICATION DATA SHEET

**Application Information**

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?:: No

Number of Copies of CRF::

Title:: METHOD FOR DYNAMICALLY  
AUTHENTICATING PROGRAMMES WITH AN  
ELECTRONIC PORTABLE OBJECT

Attorney Docket Number:: 1032326-000406

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 3

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: France

Status:: Full Capacity

Given Name:: Benoit

Middle Name::

Family Name:: CHEVALLIER-MAMES

Name Suffix::

City of Residence:: Cassis

State or Province of Residence::

Country of Residence:: France

Street of Mailing Address:: La Sardanne Les Brayes

City of Mailing Address:: Cassis

State or Province of Mailing Address::

Country of Mailing Address:: France

Postal or Zip Code of Mailing Address:: F-13260

Applicant Authority Type:: Inventor

Primary Citizenship Country:: France

Status:: Full Capacity

Given Name:: David  
Middle Name::  
Family Name:: NACCACHE  
Name Suffix::  
City of Residence:: Paris  
State or Province of Residence::  
Country of Residence:: France  
Street of Mailing Address:: 52 rue Letort  
City of Mailing Address:: Paris  
State or Province of Mailing Address::  
Country of Mailing Address:: France  
Postal or Zip Code of Mailing Address:: F-75018  
Applicant Authority Type:: Inventor  
Primary Citizenship Country:: France  
Status:: Full Capacity  
Given Name:: Pascal  
Middle Name::  
Family Name:: PAILLIER  
Name Suffix::  
City of Residence:: Paris  
State or Province of Residence::  
Country of Residence:: France  
Street of Mailing Address:: 37 cours de Vincennes

City of Mailing Address:: Paris

State or Province of Mailing Address::

Country of Mailing Address:: France

Postal or Zip Code of Mailing Address:: F-75020

### **Correspondence Information**

Correspondence Customer Number:: 21839

Phone Number:: (703) 836-6620

Fax Number: (703) 836-2021

### **Representative Information**

Representative Customer Number:: 21839

### **Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This Application	National Stage of	PCT/EP2005/050828	02/25/05

### **Foreign Priority Information**

<b>Country::</b>	<b>Application Number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>
France	0450553	03/19/04	Yes

### **Assignee Information**

Assignee Name:: GEMPLUS

Street of Mailing Address:: Avenue du Pic de Bertagne Parc, d'activite de Gemenos

City of Mailing Address:: Gemenos

State or Province of Mailing Address::

Country of Mailing Address:: France

Postal or Zip Code of Mailing Address:: F-13420